DECLARATION AND POWER OF ATTORNEY FOR UNITED STATES PATENT APPLICATION

X Original	Supplemental	Substitu	te	
As a below-named inventor	r, I hereby declare that:			
My residence, citizenship a	and post office address are	given below under my	y name.	
I believe I am an original, for which a patent is sought on the	first and joint inventor o invention entitled:	f the subject matter wh	nich is claimed and	
"Use of 4-substituted tetrahydropyiridnes for the manufacture of medicaments				
	acting upon TGF-be	ta 1"		
the specification of which			•	
is attached hereto.				
was filed on		as United States		
Application Serial No.				
and was amended on		(if applicable).	*	
X was filed on	May 20, 1998	as PCT Internation	al	
Application No.	PCT/FR98/01000			
and was amended under	PCT Article 19 on		_ (if applicable).	
I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with Section 1.56 of Title 37 of the Code of Federal Regulations.				
I hereby claim foreign p States Code of any foreign a application(s) designating at lea identify below any foreign appli designating at least one country and having a filing date before t	st one country other than cation(s) for patent or inv	the United States idententor's certificate or an attes filed by me on the	atified below and also ny PCT application(s) e same subject matter	
			Priority Claimed	
Country	Number	Filing Date	Yes No	
France	FR 9706522	28 May 1997	X	

I hereby claim benefit under Section 120 of Title 35 of the United States Code of any United States application(s) or PCT application(s) designating the United States identified below and, insofar as the subject matter of each of the claims of this application is not disclosed in said prior application(s) in the manner provided by the first paragraph of Section 112 of Title 35 of the United States Code, I acknowledge my duty to disclose material information of which I am aware as defined in Section 1.56 of Title 37 of the Code of Federal Regulations which occurred between the filing date of the prior application(s) and the national or PCT filing date of this application: Status Filing Date Application Serial No. I hereby appoint Michael D. Alexander, Reg. No. 36,080; and Paul E. Dupont, Reg. No. 27,438, or any of them my attorneys or agents with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. DIRECT TELEPHONE CALLS TO: SEND CORRESPONDENCE TO: MICHAEL D. ALEXANDER Patent Department Sanofi-Synthelabo Inc. 9 Great Valley Parkway Telephone No. (610) 889-8802 P.O. Box 3026 Malvern, PA 19355 I hereby declare that all statements made herein and in the above-identified specification of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. **BONO-COMBIE** Françoise Full name of first joint inventor Date 23/03/00 Inventor's signature 21, rue Philadelphe de Gerde; 31300 Toulouse; France Residence 21, rue Philadelphe de Gerde; 31300 Toulouse; France Post Office Address

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Citizenship

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